

Posted
5 Feb 00
JMT

Change
No. 4

KNGR 735-11

State of Kansas, Military Division
The Adjutant General's Department
Topeka, Kansas, 15 June 1983

FEDERAL PROPERTY ACCOUNTING FOR
LOST, DAMAGED AND DESTROYED PROPERTY

THIS CHANGE UPDATES KNGR 735-11 FOR ALL UNITS OF THE KANSAS ARMY NATIONAL GUARD

KNGR 735-11, dated 12 February 1982 is changed as follows:

1. Material which has been changed or added is indicated by the symbol "++"
2. Insert the following pages in sequence and remove pages as shown below:

Old Pages

+3-1
+3-2
+3-6


New Pages

++3-1
++3-2
++3-6

3. This change will be recorded as appropriate at Appendix A, KNGR 310-1, Index of Regulations.
4. This change adds the requirement for a "Transmittal Letter" (TL) from unit commander to the USPF0 Military Pay Branch when forwarding Statement of Charges for collection action.
5. This sheet is to be filed in front of the publication for reference purposes.

BY ORDER OF THE GOVERNOR:

OFFICIAL:


DAN E. KARR
COL, GSWT, KSARNG
Chief of Staff

RALPH T. TICE
MG, KSARNG
The Adjutant General

DISTRIBUTION:

A

Posted
5 Feb 00
-MM

Change
No. 3

KNGR 735-11

State of Kansas, Military Division
The Adjutant General's Department
Topeka, Kansas, 15 May 1983

FEDERAL PROPERTY ACCOUNTING FOR
LOST, DAMAGED AND DESTROYED PROPERTY

THIS CHANGE UPDATES KNGR 735-11 FOR ALL UNITS OF THE KANSAS ARMY NATIONAL GUARD

KNGR 735-11, dated 12 February 1982 is changed as follows:

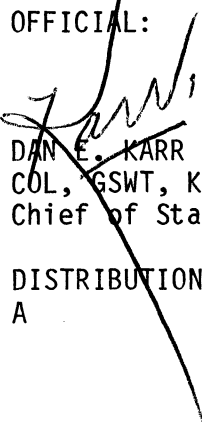
1. Material which has been changed or added is indicated by the symbol "+"
2. Insert the following pages in sequence and remove pages as shown below:

<u>Old Pages</u>	<u>New Pages</u>
ii	+ii
1-1	+1-1
2-3	+2-3
2-4	+2-4
3-1	+3-1
3-2	+3-2
3-6	+3-6
5-1	+5-1

3. This change will be recorded as appropriate at Appendix A, KNGR 310-1, Index of Regulations.
4. This sheet is to be filed in front of the publication for reference purposes.

BY ORDER OF THE GOVERNOR:

OFFICIAL:


DAN E. KARR
COL, GSWT, KSARNG
Chief of Staff

RALPH T. TICE
MG, KSARNG
The Adjutant General

DISTRIBUTION:

A

Posted
5 Feb 80
JMA

Change
No. 2

KNGR 735-11

State of Kansas, Military Division
The Adjutant General's Department
Topeka, Kansas, 27 August 1982

FEDERAL PROPERTY ACCOUNTING FOR
LOST, DAMAGED AND DESTROYED PROPERTY

THIS CHANGE UPDATES KNGR 735-11 FOR ALL UNITS OF THE KANSAS ARMY NATIONAL
GUARD

KNGR 735-11, dated 12 February 1972, is changed as follows:

- ✓1. Chapter 1, Page 1-6, Table 1-1, change Note 1 to include FSC group 5133 and 5136.
2. The purpose of this change is to add additional hand tools for summarizing on the PAMIS reporting "7" card.
3. This change does not authorize the summarizing of any nonexpendable items that are accounted for on a unit property book.
4. This change will be recorded as appropriate at Appendix A, KNGR 310-1, Index of Regulations.
5. This sheet is to be filed in front of the publication for reference purposes.

OFFICIAL:


DAN E. KARR
COL, GSWT, KSARNG
Chief of Staff

RALPH T. TICE
MG, KSARNG
The Adjutant General

DISTRIBUTION:

A

Posted
5 Feb 82
JMT

Change
No. 1

KNGR 735-11

State of Kansas, Military Division
The Adjutant General's Department
Topeka, Kansas, 8 July 1982

FEDERAL PROPERTY ACCOUNTING FOR
LOST, DAMAGED AND DESTROYED PROPERTY

THIS CHANGE UPDATES KNGR 735-11 FOR ALL UNITS OF THE KANSAS ARMY NATIONAL
GUARD

KNGR 735-11, dated 12 February 1982 is changed as follows:

1. Make the following pen and ink changes.

✓a. Chapter I, Page 1-6, Table 1-1, change Note 1 to read: "All individual clothing and equipment items and hand tools FSC 5110 and 5120 will be summarized and entered on a single line".

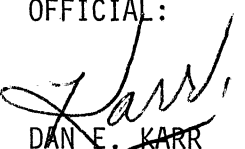
✓b. Chapter II, Page 2-3, Para 2-8b, change to read: "Prepare card keypunch adjustment data collection worksheet IAW Table 1-1".

2. The purpose of this change is to add FSC 5110 handtools for summarizing on the PAMIS reporting "7" card.

3. This change will be recorded as appropriate at Appendix A, KNGR 310-1, Index of Regulations.

4. This sheet is to be filed in front of the publication for reference purposes.

OFFICIAL:


DAN E. KARR
COL, GSWT, KSARNG
Chief of Staff

RALPH T. TICE
MG, KSARNG
The Adjutant General

DISTRIBUTION:

A

Kansas National Guard Regulation
Number 735-11 (Army)

KNGR 735-11

State of Kansas, Military Division
The Adjutant General's Department
Topeka, Kansas, 12 February 1982

FEDERAL PROPERTY ACCOUNTING FOR LOST, DAMAGED
AND DESTROYED PROPERTY

THIS REGULATION IMPLEMENTS AR/NGR 735-11 AND SETS POLICIES OF THE ADJUTANT
GENERAL OF KANSAS PERTAINING TO ACCOUNTING FOR LOST, DAMAGED OR DESTROYED
FEDERAL PROPERTY

CHAPTER I - GENERAL PROVISIONS

	Paragraph	Page
References.....	1-1	1-1
Purpose.....	1-2	1-1
Policy.....	1-3	1-1
Authorized Adjustment Documents	1-4	1-1
Use of DA Form 444 (IAR).....	1-5	1-1
Appointing Authority.....	1-6	1-2
Damaged Property.....	1-7	1-2
Property Accountability Management Information System Report.....	1-8	1-2
Table 1-1, Adjustment Data Collection Worksheet.....		1-4
Figure 1-1, Sample USPFO-KAN Form 73.....		1-7
Figure 1-2, Sample USPFO-KAN Form 73A.....		1-8
Figure 1-2.1, Sample USPFO-KAN Form 73B.....		1-9

CHAPTER II - REPORTS OF SURVEY (DA FORM 4697)

Responsibility.....	2-1	2-1
Report of Survey is Mandatory When.....	2-2	2-1
Initiating and Processing Time.....	2-3	2-1
Posting Reports of Survey.....	2-4	2-2
Copies Required.....	2-5	2-2
Erasures and Alterations.....	2-6	2-2
Evidence Required.....	2-7	2-2
Action Required by Responsible Person.....	2-8	2-3
Action Required by Property Book Officer.....	2-9	2-3
Action Required by Appointing Authority.....	2-10	2-3
Action Required by Surveying Officer.....	2-11	2-4
Recovered Property.....	2-12	2-4
Table 2-1, How to Prepare DA Form 4697.....		2-5
Table 2-2, Report of Survey Flow Chart.....		2-8
Figure 2-1, Sample DA Form 4697.....		2-9
Figure 2-2 and 2-3, Sample Continuation Sheet of Report of Survey.....		2-10

This regulation supersedes KNGR 735-11 w/changes, dated 1 January 1980.

CHAPTER III - STATEMENT OF CHARGES, DD FORM 362

	Paragraph	Page
Purpose.....	3-1	3-1
Restrictions.....	3-2	3-1
Action Required by Unit Commander.....	3-3	3-1
Action Required by Property Book Officer.....	3-4	3-2
Table 3-1, How to Prepare DD Form 362 (Statement of Charges for Government Property Lost, Damaged or Destroyed).....		3-3
Table 3-2, Statement of Charges Flow Chart.....		3-6
Figure 3-1, Sample DD Form 362.....		3-7

CHAPTER IV - CASH COLLECTION (DD FORM 1131)

Purpose.....	4-1	4-1
Policy.....	4-2	4-1
Restrictions.....	4-3	4-1
Action Required by Unit Commander.....	4-4	4-1
Action Required by Property Book Officer.....	4-5	4-2
Table 4-1, Cash Collection (DD Form 1131) Flow Chart.....		4-3
Figure 4-1, Sample Cash Collection Voucher (DD Form 1131)		4-4
Figure 4-2, Sample Cash Collection Voucher (DD Form 1131)		4-5

CHAPTER V - ACCOUNTABILITY OF ORGANIZATIONAL AND INDIVIDUAL CLOTHING FOR ARNG MEMBERS WHO ARE ABSENT AND THEIR WHEREABOUTS ARE UNKNOWN

Purpose.....	5-1	5-1
Action by the Commander.....	5-2	5-1

CHAPTER VI - ACCOUNTABILITY OF ORGANIZATIONAL AND INDIVIDUAL CLOTHING AND EQUIPMENT (OCE) (ICE) FOR DECEASED PERSONNEL

Policy.....	6-1	6-1
Procedures.....	6-2	6-1

CHAPTER I
GENERAL PROVISIONS

1-1. References:

- a. AR 735-11.
- b. NGR 735-11.

1-2. Purpose: Authorized adjustment procedures. This regulation enumerates the authorized adjustment procedures available to individuals having responsibility for property which has become lost, damaged, or destroyed in order that such individuals may determine readily what procedure is to be followed in accounting for the property and obtaining relief therefrom. Whenever there is doubt as to which procedure should be employed, a Report of Survey, DD Form 4697 will be prepared. The procedures in this regulation provide to the responsible individual specific methods to obtain relief from responsibility. This regulation does not change procedures and policies contained in AR/NGR 735-11.

1-3. Policy: In any case where property of the Department of the Army is lost, damaged, or destroyed by causes other than fair wear and tear, a Report of Survey or other administrative action, in accordance with AR/NGR 735-11, will be accomplished to determine the facts concerning such loss, damage or destruction, the amount thereof, and whether the individual having accountability and/or responsibility is held pecuniarily liable or not.

1-4. Authorized Adjustment Documents: Relief from property responsibility can be obtained only by the following actions:

- a. Report of Survey, DA Form 4697.
- b. Board action according to AR 15-6.
- c. Statement of Charges, DD Form 362.
- d. Cash Collection, DD Form 1131.

+1-5. Use of DA Form 4949 (IAR):

- a. DA Form 4949 cannot be used to adjust property records for inventory gain and losses.
- b. DA Form 4949 will be used to make minor administrative adjustments in property book accounts only when there is no actual loss of property. Example would be model, stock number, or registration number changes. See NGB PAM 710-2-1.

1-6. Appointing Authority:

a. The State Adjutant General on proper orders will designate federally recognized ARNG Officers in the grade of O6 or above as appointing authority.

b. Appointing authorities will be commanders wherever possible to ensure the decisions are made by the chain of command.

1-7. Damaged Property:

a. Reference para 3-4, AR 735-11.

b. Only qualified technical inspectors, property classification officers may classify property physically on hand as unserviceable. From its general condition and appearance, the property may be classified unserviceable through fair wear and tear while in service because of normal authorized usage without apparent negligence.

c. When damaged property is determined unserviceable through causes other than fair wear and tear, the commander responsible for the property will investigate the circumstances to determine the proper action authorized. Upon completion of investigation, the following action will be taken.

(1) If negligence is not involved, attach a statement to maintenance request or turn-in document stating the cause of the damage. The appointing authority will sign the statement.

(2) When negligence is involved:

(a) If liability is admitted and damage does not exceed persons monthly basic pay, prepare DD Form 362 or DD Form 1131.

(b) If liability is not admitted or damage exceeds persons monthly basic pay, prepare Report of Survey.

1-8. Property Accountability Management Information System Report:

a. NGR 735-11 requires the following data be collected and reported to NGB on a quarterly basis:

(1) Unit dropping property.

(2) Dollar amount of adjustment.

(3) Type of adjustment, i.e., Report of Survey, Statement of Charges, Cash Collection.

(4) Type of property, i.e., MTOE, TDA, Organizational Clothing and Equipment, Individual Clothing and Equipment, Weapons, Ammunition, Tools.

(5) Reason for adjustment, i.e., change of command, vehicle accident, AT or field exercise, cyclic inventory, fire, theft, etc.

(6) Type of unit, i.e., combat, combat support, combat service support.

b. Information from this data summary will be used to develop an information base from which future regulations, policy, and procedural changes can be initiated in order to improve the property accountability system.

c. Automated Data Processing procedures have been developed to extract and machine list data required from a "Key punch Adjustment Data Collection Worksheet", PFO Form 73 or preprinted Form 73A and B.

d. Concurrent with the preparation of the property adjustment documentation, the originator will initiate a card key punch worksheet IAW instructions in Table 1-1. Worksheet will accompany adjustment documents that are forwarded to the USPFO. This worksheet is required with all adjustment documents.

TABLE 1-1, KNGR 735-11

ADJUSTMENT DATA COLLECTION WORKSHEET
(PFO Form 73)

<u>Data Element</u>	<u>Card Column</u>	<u>Explanation</u>
Card Code	1	Constant 7
Transaction Code	2	Constant M (Code 4 for Gains)
Analysis Code	3	Constant 1 (Code 2 for Gains)
Type Account Code	4	Leave Blank
Type Authorization Code	5	1 - Auth by MTOE 2 - Auth by MTDA 3 - Auth by CTA 8 - Unauthorized item 9 - Auth by TM, AR, Letter, or other special auth.
Entry not required for components of sets, kits, and outfits		
Reason Adjusted	6	A - Change of Command B - Shelf Life Expired C - Airdrop D - Aircraft Crash E - Vehicle Accident F - AT or Field Exercise G - Inventory (Includes Showdown Inspections) H - Natural Disaster J - Fire K - Administrative or Accounting Error L - Theft -- Armory M - Theft -- Other N - Reserved for NGB P - Shipping Adjustments R - State Active Duty S - Other
Type Property Code	7	1 - CTA (Except 50-900) 2 - POL 3 - Organizational Clothing & Equipment 4 - Individual Clothing & Equipment 5 - Weapons or Ammunition 6 - Handtools (FSG 5120) 7 - Components Except FSG 5120 8 - MTOE (Except Weapons) 9 - Other

TABLE 1-1, KNGR 735-11

<u>Data Element</u>	<u>Card Column</u>	<u>Explanation</u>
NSN	8-20	See Note 1.
Type Adjustment Document	21	1 - I/A 2 - Report of Survey 3 - Statement of Charges 5 - Cash Collection Voucher
	22	CC not shown on Worksheet; information mechanically entered.
Unit of Issue	23-24	
Quantity	25-29	Justify data to right; zero fill to the left
Document Number (Use Unit assigned DODAAC)	30-43	Need not be repeated on all lines with same Document Number.
Logistics Control Code	44	Leave blank. Information will be entered by USPF0.
Damage Code	45	D - Damaged Property. Leave blank for lost or destroyed property.
Authorized LIN	46-51	See Note 1. Line item number contained in authorization document.
Entry not required for components of sets, kits, and outfits	52-54	Card Columns are not shown on worksheet; information is mechanically entered.
Rec/Expend Code	55	For Gains only.
Reportable Item Control Code (RICC)	56	Numeric Code 1, 2, 3, or 0 assigned to Reportable Items. Reference SB 700-20. Code 9 for LIN's 99999Y. <u>Must have an entry.</u>
NSN LIN	57-62	See Note 1. The line item number assigned to NSN shown in CC 8-20. In most cases, this LIN will be the same as LIN shown in CC 46-51. Only time LIN will be different is when item on hand is SUB for authorized item.
Entry not required for components of sets, kits, and outfits		

TABLE 1-1, KNGR 735-11

<u>Data Element</u>	<u>Card Column</u>	<u>Explanation</u>
Nomenclature	63-73	See Note 1. Enter noun.
Total price for LIN	74-80	See Note 1. The value of the loss or damage recorded on adjustment document in Block: 12 of DA Form 4697 12 of DA Form 4696 Total Column of DD Form 362 Amount Column of DD Form 1131

See
C1

NOTE 1: All individual clothing and equipment items and hand tools ~~(FSC 5110)~~ will be summarized and entered on a single line:

and 5120 → FSC 5110
FSC 5133
and 5136

CC 8-20	Zero Fill
CC 23-29	Zero Fill
CC 46-51	Zero Fill
CC 55	Blank
CC 56-62	Zero Fill
CC 63-73	"Indiv C&E" or "Hand Tools"
CC 74-80	Consolidated Total Dollar Value

NOTE 2: Using pre-printed USPFO Form 73 A&B Figure 7&7A. To preclude considerable research time required to look up data, codes and time required to manually complete PFO Form 73, pre-printed PFO Forms 73 A&B may be used for loss/damaged ICE/OCE. However, card columns 6, 21, 25-29, 31-43, 74-80 must be completed manually. Care must be taken in completing LIN's B59567, D64043, F28747, K85127, M17632, as these LIN's also have other stock numbers in our current inventory. ALL LIN'S NOT USED MUST BE LINED OUT.

FIGURE 1-1, KNGR 735-11

STOCK NUMBER		DOCUMENT NUMBER		DATE		SERIAL NUMBER		AUTHORIZED LIN		ON HAND LIN		NOMENCLATURE		TOTAL PRICE FOR LIN																																																																	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND		NOMENCLATURE		TOTAL PRICE																																																											
KEY		TYPE		QTY		DOBAC		DATE		SERIAL		NUMBER		AUTHORIZED		ON HAND																																																															

FIGURE 1-2, KNGR 735-11

STOCK NUMBER	QTY	DOCUMENT NUMBER			AUTHORIZED LIN	ON HAND LIN	NOMENCLATURE	TOTAL PRICE FOR LIN
		DODMAC	DATE	SERIAL NUMBER				
7M1A3	3				B15825	3B15825	BAG WTR PRF	
7M1A3	3				B59567	2B59567	BELT INDIV	
7M1A3	3				B72225	3B72225	BLANKET WL	
7M1A3	3				C96536	3C96536	CANTREEN PLA	
7M1A3	3				D11812	3D11812	CARRIERS INT	
7M1A3	3				D64043	3D64043	CASE FIRSL	
7M1A3	3				D70345	3D70345	CASE SLP	
7M1A3	3				D70482	3D70482	CASE SML AR	
7M1A3	3				F28747	3F28747	COVER HLMT	
7M1A3	3				F30391	3F30391	COVER CANT	
7M1A3	3				F54817	3F54817	CUP WTR CAN	
7M1A3	3				H39835	9H99999	FIELD PACK	
7M1A3	3				H93071	3H93071	FORK MESS	
7M1A3	3				K34733	3K34733	HELMET GRND	
7M1A3	3				K85092	2K85092	INSECT BAR	
7M1A3	3				K85127	0K85127	INSECT HEAD	
7M1A3	3				L00210	3L00210	INTL HND	
7M1A3	3				L29321	3L29321	KNIFE MESS	
7M1A3	3				L71200	3L71200	LINER HLMT	
7M1A3	3				M17632	0M17632	MATRESS IN	

USPFO-KAN Form 73 A

Adjustment Data Collection Worksheet

1 Nov 78

FIGURE 1-2, KNGR 735-11

FIGURE 1-2.1, KNGR 735-11

STOCK NUMBER	QTY	DOCUMENT NUMBER				AUTHORIZED LIN	ON HAND LIN	NOMENCLATURE	TOTAL PRICE FOR LIN
		DODAC	DATE	SERIAL NUMBER					
7M1A3	384150					M52555	M52555	MITTEIN INST	
7M1A3	384150					M53240	M53240	MITTEIN SHELL	
7M1A3	384150					N37752	N37752	TRS WET WEA	
7M1A3	384150					N39848	N39848	VRSHOE MEN	
7M1A3	384150					N53095	N53095	PAN MESS KT	
7M1A3	384150					N70110	N70110	PARKA WET W	
7M1A3	384150					P17415	P17415	PONCHO WET	
7M1A3	384150					S52982	S52982	SCARF NKWR	
7M1A3	384150					T00150	T00150	SHIRT HALP	
7M1A3	384150					T04205	T04205	SHIRT CW WL	
7M1A3	384150					T71673	T71673	SLEEPING BG	
7M1A3	384150					U06645	U06645	SPON MESS	
7M1A3	384150					U73323	U73323	SPNDR FIELD	
7M1A3	384150					U73597	U73597	USPNDR TRS	
7M1A3	384150					X36109	X36109	TRRS X/C NYL	
7M1A3	384150					X37180	X37180	TRRS WOOL	
7M1A3	384150							INDIV C E	

CHAPTER II

REPORTS OF SURVEY (DA FORM 4697)

2-1. Responsibility: Company Commander or primary hand receipt holder is responsible for initiation of Report of Survey.

2-2. Report of Survey is mandatory when:

a. Sensitive items lost or destroyed, i.e., small arms and ammunition. (See NGR 190-11 for additional requirements.)

b. Directed by higher authority.

c. Property loss disclosed as a result of change of accountable officer inventory (change in PBO).

d. Damaged property (includes vehicle accident) if negligence is involved and liability is not admitted or if liability is admitted but the damage exceeds the person's monthly basic pay.

e. Individual admits liability, but exceeds individual's monthly basic pay. One (1) month basic pay is defined as follows:

(1) ARNG members: Thirty (30) days of basic pay at current grade and years of service.

(2) ARNG Technicians: One-twelfth of annual salary at current grade and step. Annual salary is determined by multiplying current hourly rate by 2,080 hours.

f. An individual refuses a Statement of Charges or Cash Collection Voucher.

g. Overdrawn/underdrawn meal status for unidentifiable accounting variances exceeding authorized tolerances. (3 percent AT, 10 percent IDT.) Reference para 3-11, NGR 30-1.

h. Total handling loss of a specific bulk petroleum product is above the allowable loss and dollar value is greater than \$250.00.

i. Involuntary Collection Actions for members whose whereabouts are unknown.

2-3. Initiating and Processing Time: Promptness is a vital factor in the effectiveness so that investigation can be made while those persons involved and witnesses are available and the facts are still fresh in their minds. Preparation and initiation will be no more than 45 calendar days after the discovery of the loss or damaged property. Delays beyond will require a written statement of the responsible individual explaining the circumstances and will be included in or appended to the survey.

2-4. Posting Reports of Survey:

a. Report of Survey will be posted to property records on items that have been lost or destroyed (not available for turn-in) when document number is assigned by the Property Book Officer.

b. Do not post when items are damaged, uneconomically repairable, or available for turn-in. Damaged property will remain on property records until survey officer prepares a statement releasing the item for repair or turn-in. Attach a copy of the statement to turn-in document or maintenance request. (See Figure 2-3, AR 735-11, for sample release statement.)

c. List the end items of sets, kits, and outfits on survey, followed by the lost or destroyed components. Do not post the end item to property records unless the entire end item is lost or destroyed.

2-5. Copies required: Prepare DA Form 4697 in original and six copies unless otherwise specifically provided for in this regulation. More copies may be prepared when required.

2-6. Erasures and alterations: Do not make erasures, interlineations, and other alterations materially changing any part of blocks 6 through 11 (DA Form 4697) or any exhibit that has been sworn to or otherwise attested. The person originally making the entry may make minor corrections of attested entries provided he or she initials the change.

2-7. Evidence required: The company commander or primary hand-receipt holder will make a concise but complete statement in block 11 (date and circumstances), DA Form 4697. The statement will outline the essential facts on the loss or damage. The object of this statement is to present a brief description of the loss or damage and an explanation of how it occurred. This should enable the appointing authority to determine the need for appointing a surveying officer or recommend relief from responsibility without action by a surveying officer. In many cases, the statement will be all the evidence required. However, if it is considered desirable or if the case is of such a nature that supporting evidence is required to develop all the facts, more evidence will be appended to the report of survey. When required, the initiator will ensure that added evidence is:

a. Prepared in the form of certificate for military and civilian personnel. DA Form 2823 (Sworn Statement) may be prepared, if proper.

b. Prepared with the original and two copies. Attach the original to the original report of survey. Attach a copy to copies 5 and 6 of Report of Survey. More copies may be prepared when required.

c. Typed or legibly printed on plain bond paper (8½ x 11 inches) with the word CERTIFICATE typed or printed across the top. If bond paper is not available, other suitable paper may be used.

d. Dated and signed by the person making the statement.

e. Lettered alphabetically at the bottom of the certificate followed with the date, amount, and organization or account shown on the face of the Report of Survey. Example: "Exhibit A, R/S, 2 Feb 82, \$362.15, Co A, 307th Sig Bn." Other exhibits such as an ECOD report, military police report, etc., will also refer to the Report of Survey.

2-8. Action required by responsible person:

a. Prepare Report of Survey in original and six (6) copies IAW Figure 2-1, 2-2, 2-3, and Table 2-1. Each copy will be numbered consecutively in the lower right hand margin, i.e., Copy 1, Copy 2, etc. DO NOT NUMBER THE ORIGINAL.

b. Prepare card keypunch adjustment data collection worksheet IAW Table 1-1 and Figure 1-1, 1-2, and 1-2.1.

c. Forward original and copies 1 thru 5 with attached exhibits and the adjustment data collection worksheet to Property Book Officer. See Table 2-2, Flow Chart.

d. Retain copy 6 with exhibits as suspense.

2-9. Action required by Property Book Officer:

a. Review adjustment document and data collection worksheet for completeness and accuracy. Verify prices with AMDF. Document will be annotated and initialed that prices have been verified.

b. Assign a document number and also enter document number on adjustment data collection worksheet.

c. Forward original, copies 1 and 2 with exhibits to the appropriate Appointing Authority. See Table 2-2, Flow Chart.

d. Forward copy 3 to the USPFO with data collection worksheet (PFO-KAN Form 73).

e. Forward copy 4 to the Approving Authority (TAG Kansas).

f. Post property records and retain copy 5 with exhibits to support temporarily the entries in the property book.

2-10. Action Required by Appointing Authority:

a. Review to determine the proper action to take. If survey is incomplete, return it to initiator for further evidence or investigation.

b. Take action as outlined in Chapter 4, Section I, AR/NGR 735-11.

c. Reports of Survey involving desertion (whereabouts unknown) will be reviewed for completeness and ensure that reasonable bona fide efforts have been made to recover the property and that negligence is not indicated on the part of others. When satisfied with the results, the Appointing Authority will take action in Block 26 in lieu of appointing a Survey Officer and recommend the accountable and responsible officer be relieved of accountability and responsibility without charge. See Chapter V of this regulation.

2-11. Action Required by Surveying Officer:

a. Conduct a thorough investigation to place responsibility where it belongs and make recommendations as to pecuniary liability.

b. Take action as outlined in Chapter 4, Section II, AR/NGR 735-11.

2-12. Recovered Property:

a. Before a document number is assigned to the survey, initiator will:

(1) Line out and initial recovered items.

(2) If all property is recovered, destroy the document.

b. After a document number is assigned to the survey:

(1) Initiator will:

(a) Prepare and sign DA Form 3161 annotated as found on installation cross reference to Report of Survey and forward to PBO.

(b) Prepare PFO-KAN Form 73 (code 4, CC2, and code 2, CC3) and forward along with DA Form 3161 to PBO.

(2) PBO will:

(a) Assign document number.

(b) Post to property records.

(c) Retain original DA Form 3161 to support property book adjustments.

(d) Forward one copy of DA Form 3161 and PFO-KAN Form 73 to the USPF0.

(e) Take necessary action to attach copy of DA Form 3161 to Report of Survey as a exhibit.

(3) Under no circumstances will pen and ink or pencil changes be made to Blocks 6, 7, 8, 9, and 10 on DA Form 4697 after Accountable Officer has assigned a document number.

c. Recovered property for losses resulting from USPF0 Audit will be processed in accordance with para 2-12b.

TABLE 2-1, KNGR 735-11

How to prepare DA Form 4697 (Department of the
Army Report of Survey)

Block	Instructions
1. -----	Enter the date the report of survey is prepared.
2. -----	Leave blank, secretary of the approving authority will enter the survey number.
3. -----	If the property is carried on the organization property book, or on organizational clothing and equipment records, enter "Organizational". If the property is carried on the installation property book, enter "Installation".
4. -----	Enter the address of the accountable officer. Also enter the UIC for property book accounts. If all the items listed on the report of survey are not recorded on a property book, enter the address of the activity maintaining the expandable or durable document register.
5. -----	Enter the name, grade, and organization of the person preparing the document. Normally, this person will be the company commander or primary hand-receipt holder. When it is impractical for these persons to prepare the report, provisions will be made for others to perform this duty for them. Include the unit identification code (UIC). Line out the words "accountable officer" or "Primary hand-receipt holder", as proper.
6. -----	Enter the correct stock number and line item number. If the item is nonstandard, enter "nonstandard" or "NSI".
7. -----	Enter the correct description of the articles lost, damaged, or destroyed. If the articles are nonstandard, give an accurate description enough for identification. When the articles involved have been assigned serial numbers, include such numbers for more identification. Describe damaged major units as such and not as damaged component parts. If the space on the face of the form is insufficient, use blank paper, properly identified. Do not trim the basic form and use it as a continuation sheet. When RICC 1 and 2 items are listed on the report of survey and are totally lost (no residue to turn-in), enter the words "No residue".
8. -----	Enter the number of units of the articles listed, together with the unit of issue, such as "lea", "2 pr", "2 doz", etc.
9. -----	Enter the unit price of the item. Obtain this amount from the current AMDF. If the unit price has not been set up, is not on record, and cannot be determined, use an estimated cost. Add the abbreviation "est" after the figure. Add as an exhibit a brief explanation (or copy of computation) as to how the estimate was calculated. Do not enter cost of repairs in this column.

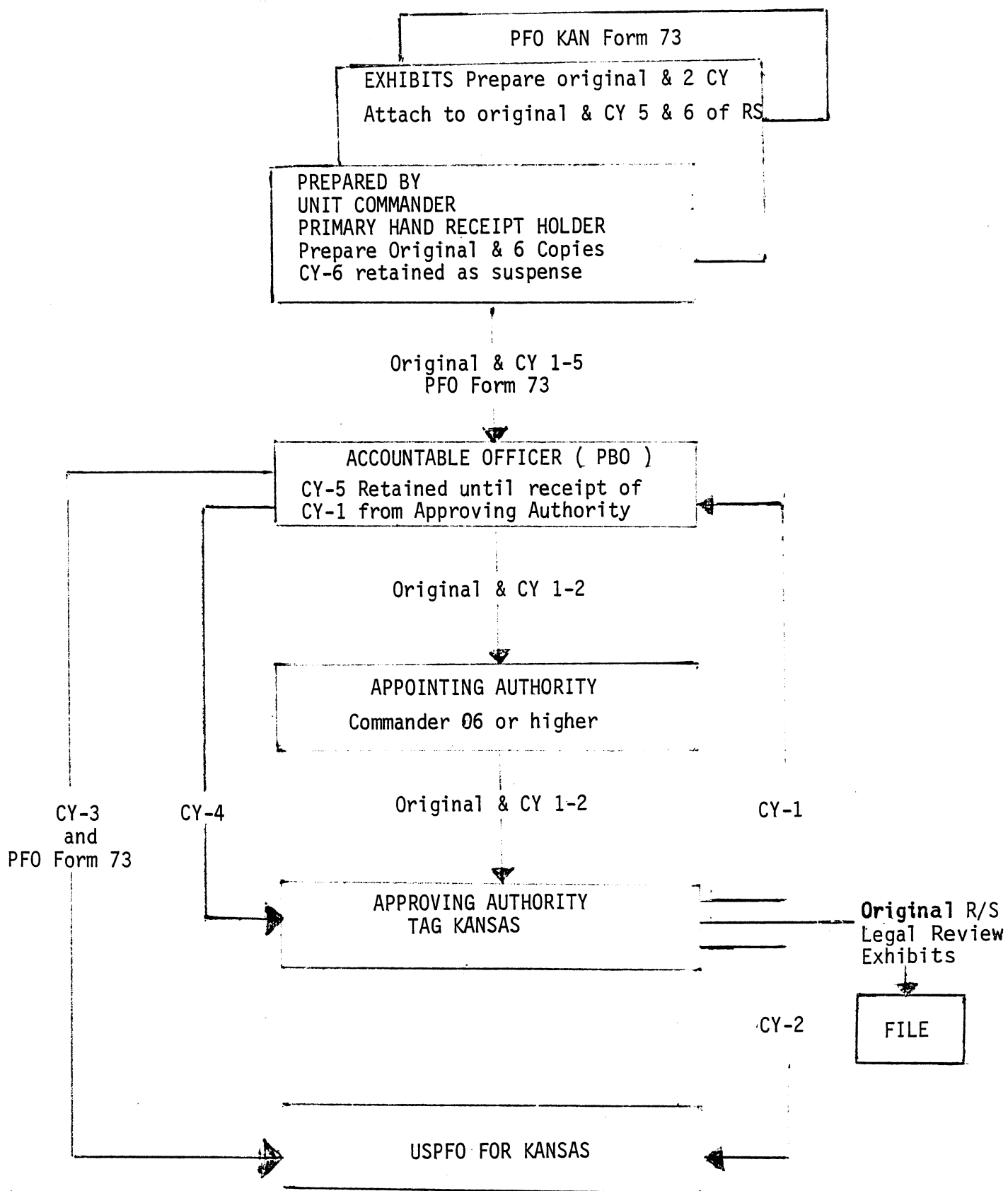
TABLE 2-1, KNGR 735-11

Continued

Block	Instruction
10. -----	Enter the total cost of all units of each article listed that has been lost or destroyed. Total cost is computed by multiplying the unit price (item 9) of each item listed by the quantity (item 8). For damaged property, enter the ECOD. After the last entry, draw a line and enter the sum of the entries in the column and enter "Grand Total" in the unit price column. If continuation sheets are used, show the "subtotal" on each sheet. Show the grand total on the last sheet. The grand total will be the total cost of all items listed on all sheets.
11. -----	Enter a concise and accurate statement of the facts in the case. Include the date and place of loss or damage. Show all persons directly concerned by name, social security number, and grade for military and civilian employees. Refer to exhibits by the capital letter designation assigned. Show exhibits initially attached; for example, "Exhibits A to D attached." If space on the form is insufficient, continuation sheets may be used. Do not trim the basic form for use as a continuation sheet.
12. -----	The person providing statement in block 11 will sign in the signature block. Type the person's name, grade, and social security number in the block below the signature block. Modify the affidavit block as proper.
13. -----	Enter the address, date, and signature of person administering the affidavit. The affidavit must be sworn to or affirmed before a summary court officer, adjutant, assistant adjutant, or other Army officer authorized by Uniform Code of Military Justice, Article 136, or by a notary public or civil court officer, and authenticated by him or her. If the affidavit is sworn to or affirmed before a notary public, his or her seal must be affixed. In the ARNG, the statement may be sworn to before the survey officer or any person authorized to administer oaths under State law.
14. -----	Enter the date of signature in block 15.
15. -----	Enter the name, grade, and signature of the accountable officer. If all the property listed is not on a property book account, the person responsible for the expendable or durable document register will sign this block.
16. -----	Enter the document or voucher number. (DODAAC date and serial number).
17. -----	The appointing authority will check the proper block.

Continued

Block	Instruction
18. -----	Enter the date of signature.
19. -----	Enter the name, grade, and title of the appointing authority.
20. -----	The appointing authority will sign.



DEPARTMENT OF THE ARMY REPORT OF SURVEY <small>For use of this form, see AR 735-11; the proponent agency is DCSLOG.</small>		1. DATE PREPARED 20 January 1982	2. SURVEY NUMBER	
3. TYPE OF PROPERTY Organizational		4. ADDRESS OF ACCOUNTABLE OFFICER 307th Sig Bn, Anytown, KS 66601, UIC: WARVAA		
5. ORIGINATOR (Accountable officer , or primary hand receipt holder) Philip B. Murphy, CPT, Commanding, Co A, 307th Sig Bn, UIC: WARBAO				
6. NATIONAL STOCK NUMBER	7. ITEM DESCRIPTION	8. QTY	9. UNIT PRICE	10. TOTAL COST
1. 6650-00-530-0974 (B67218)	Binocular 7x50 Military Reticle, M17A1 M17A1, SN: 24567	1 ea	\$350.00	\$350.00
2. 5180-00-672-2611 (W38895)	Tool Kit, General Mechanics, Light Weight			
Componenet Loss				
5110-00-241-9148	File, Hand	1 ea	1.80	1.80
5120-00-061-8541	Hammer, Hand	1 ea	6.75	6.75
5120-00-240-5328	Wrench, Adjustable	1 ea	3.60	3.60
			Grand Total	\$362.15
11. DATE AND CIRCUMSTANCES <p>On 12 January 1982, after a joint inventory between me, CPT Philip B. Murphy, 228-13-4441, Commander, Co A, 307th Signal Battalion and my replacement, CPT George C. Piercy, 215-44-2914, the items listed above were discovered missing. After a complete search of the area, I was unable to locate the missing items. The last time I recall seeing the binoculars was during the monthly inventory on 10 December 1981. I definitely recall seeing them on that date, as I had just returned them to the company safe from my quarters, where I was using them to spot birds. The binoculars are normally stored in a locked container in the company orderly room. I had one key to the container. The second key was maintained in the company key box, which is controlled by the company first sergeant, 1SGT Ronald Campbell, 377-48-5050, or the company CQ (Exhibit A). The binoculars were not present during the joint inventory on 12 January 1982. The tool kit was inventoried when I took command 2 years ago. I did not inventory it again because the tool kit was excess to the unit. There was no need to reinventory it because I was the only user of the tool kit. I kept the tool kit stored under my desk.</p> <p style="text-align: center;">Exhibit A attached</p>				
12. AFFIDAVIT I do solemnly swear (or affirm) that (to the best of my knowledge and belief) the articles of public property shown above and/or on attached sheets were lost, destroyed, damaged, or worn out in the manner stated, while in the public service.		13. Subscribed and sworn to (or affirmed) before me at Anytown, KS 66601 this 20th day of January 1982		
		NAME AND GRADE (type and sign) WALTER C. BAGWELL, CPT, Adj		
14. DATE 21 Jan 82		15. NAME, GRADE, AND SIGNATURE OF ACCOUNTABLE OFFICER DONALD M. JONES, CW4, USA		16. DOCUMENT NUMBER WT4KA5 2021-0025
17. APPOINTING AUTHORITY <p>I have received the evidence pertaining to the lost, damaged, or destroyed property, and have determined that the following action is required.</p> <p>a. <input type="checkbox"/> No further investigation is required. There is no positive evidence of negligence. I do not suspect willful misconduct, or deliberate unauthorized use. I hereby forward this document to the approving authority for final action. (Proceed to block 37.)</p> <p>b. <input checked="" type="checkbox"/> The circumstances surrounding the lost, damaged or destruction warrants further investigation. (Proceed to block 21.)</p> <p>c. <input type="checkbox"/> Conduct an investigation according to AR 15-6. Attach this document, as an exhibit, to the investigation and forward it to the approving authority.</p>				
18. DATE 31 Jan 82		19. TYPED NAME, GRADE, AND TITLE OF APPOINTING AUTHORITY LEROY J. WEATHERS, LTC, SC Commander, 2d Sig Bn		20. SIGNATURE

21. APPOINTING AUTHORITY		22. STATION		23. DATE	
24. NAME, GRADE OF SURVEYING OFFICER					
25. YOU ARE APPOINTED SURVEYING OFFICER BY ORDER OF: _____ (Typed name, grade of Appointing Authority)					
26. FINDINGS AND RECOMMENDATION I have examined all available evidence as shown in exhibits _____ to _____ and as indicated below have personally investigated the same and it is my belief that the article(s) listed hereon and/or attached to sheets, total cost \$ _____					
27. RECOMMEND PECUNIARY CHARGE		a. ACTUAL LOSS	b. AMOUNT CHARGED	c. LOSS TO GOVERNMENT	
28. DATE	29a. TYPED NAME, GRADE OF SURVEYING OFFICER		b. SIGNATURE		
30. I have examined the findings and recommendations of the Surveying Officer on this report of survey and the exhibits _____ to _____ and <input type="checkbox"/> desire to make a statement which is attached hereto; <input type="checkbox"/> do not desire to make a statement. I am aware of my right to legal advice in preparing the statement and, if a pecuniary charge is finally approved, to make appeal and (If an enlisted man) my right to request remission of indebtedness. I am/am not the accountable officer for the lost or damaged property. The property was/was not my personal arms or equipment.					
31. DATE	32a. TYPED NAME, GRADE OF INDIVIDUAL BEING CHARGED		b. SIGNATURE		
33. RECOMMENDATION BY THE APPOINTING AUTHORITY <input type="checkbox"/> CONCUR <input type="checkbox"/> NONCONCUR		34. COMMENTS			
35. DATE	36a. TYPED NAME, GRADE & TITLE OF APPOINTING AUTH		b. SIGNATURE		
37. APPROVING AUTHORITY a. <input type="checkbox"/> REJECTED. Investigation is required. Appoint a survey officer. Date _____ Initials _____ b. <input type="checkbox"/> REJECTED. Investigation incomplete. Additional information required. Date _____ Initials _____ c. <input type="checkbox"/> APPROVED BY AUTHORITY OF THE SECRETARY OF THE ARMY.				38. PECUNIARY CHARGE	
				a. ACTUAL LOSS	
				b. AMOUNT CHARGED	
				c. LOSS TO GOVERNMENT	
39. DATE	40a. TYPED NAME, GRADE & TITLE OF APPROVING AUTH		b. SIGNATURE		

FIGURE 2-2 and 2-3, KNGR 735-11

Blocks 6-10 continued, Report of Survey, 20 Jan 82; Co A, 307th Sig Bn.

NATIONAL STOCK NUMBER	ITEM DESCRIPTION	QTY	UNIT PRICE	TOTAL COST
-----------------------	------------------	-----	------------	------------

(S A M P L E)

-2-

Figure 2-2, Sample continuation sheet (Blocks 6-10, DA Form 4697)

Block 11 continued, Report of Survey, 20 Jan 82; Co A, 307th Sig Bn.

(S A M P L E)

-2-

Figure 2-3, Sample continuation sheet (Block 11, DA Form 4697)

FIGURE 2-2 and 2-3, KNGR 735-11

CHAPTER III

STATEMENT OF CHARGES, DD FORM 362

3-1. Purpose: Statement of Charges, DD Form 362, can be used if an individual admits to loss and liability for property for which he or she is responsible and the total charge does not exceed their monthly basic pay.

3-2. Restrictions:

a. If liability is admitted and charge is more than one (1) month basic pay, a Report of Survey is required.

b. Statement of Charges cannot be used for loss of sensitive items, i.e., small arms, ammunition or to purchase government property.

3-3. Action Required by Unit Commander:

a. Items listed on DD Form 362 will be depreciated in accordance with para 4-19, AR 735-11.

b. Prepare in original and five (5) copies, plus one (1) copy for each additional individual listed on DD Form 362. See Figure 3-1 and Table 3-1.

c. Have the DD Form 362 signed by the individual(s).

d. Commander sign and enter date in "Organizational Commander" block.

e. Retain copy 5 of DD Form 362 to support temporary hand receipt file and suspense.

f. Provide individual a copy of DD Form 362.

g. Prepare card keypunch adjustment data collection worksheet IAW Table 1-1.

++ h. Prepare Transmittal Letter (TL) to the USPFO Military Pay Branch (MPB) and forward with original and four (4) copies of DD Form 362 and data collection worksheet to the Property Book Officer maintaining the document register (DA Form 2064) for assignment of document number.

i. Insure a completed copy of DD Form 362 is later received back from the USPFO Military Pay Branch.

j. Verify that collection input has been reflected on DA Form 3686 (LES) when it is filed, IAW Chapter 2, NGB Pamphlet 37-104-3 (T).

k. If an individual does not accept the charges and refuses to sign, line out the name of the individual, the amount of the charge, and the corresponding quantities column of the articles charged and write "Report of Survey" in the column headed "Signature of Individual" opposite name of individual and immediately prepare a Report of Survey.

3-4. Action Required by Property Book Officer:

a. Assign document number.

b. Review for completeness and accuracy. Verify prices with AMDF. Document will be annotated and initialed that prices have been verified.

c. Post property records.

d. Retain a suspense copy. (Copy 4)

++ e. Forward the Transmittal Letter (TL) with original and three (3) copies of DD Form 362 and data collection worksheet to the USPFO Military Pay Branch. For AGR personnel, forward to TAG-KS, ATTN: SPMO.

f. Insure a signed copy is received back from USPFO Military Pay Branch (for voucher file).

TABLE 3-1, KNGR 735-11

TABLE 3-1. How to prepare DD Form 362 (Statement of Charges for Government Property Lost, Damaged or Destroyed)

1. Class of property.....	Enter the type of property, i.e., organizational or installation property, as applicable. Following the class of supply, enter the organization and identification code (UIC) of the unit maintaining the document register.
2. Organization.....	Enter the organization and UIC to which the persons are assigned.
3. Date.....	Enter the date of preparation.
4. For month of.....	Enter the month or pay period in which the persons are assigned.
5. Stock record account or other..... property record of accountable officer	Enter the name of the officer responsible for the document register.
6. Station.....	Enter the City and State where located.
7. Stock No.....	Enter the stock number and line number, if applicable.
8. Articles.....	Enter the complete description, and current price as contained in the proper, current AMDF, for the articles lost, damaged, or destroyed. In case of damage, add "damage to". When space on the face of the form is insufficient, blank paper, property identified, may be used as continuation sheets; however, in no case trim the basic form for use as continuation sheets. Also enter the reportable item control code (RICC) for RICC 1 and 2 items. When RICC 1 and 2 items are listed on the statement of charges, and they are totally lost or destroyed (no residue to turn-in) enter the words "No Residue".
9. Quantities.....	Enter the quantity of each article lost or damaged by each person.
10. Total articles.....	Enter the total quantities of each article lost or damaged.

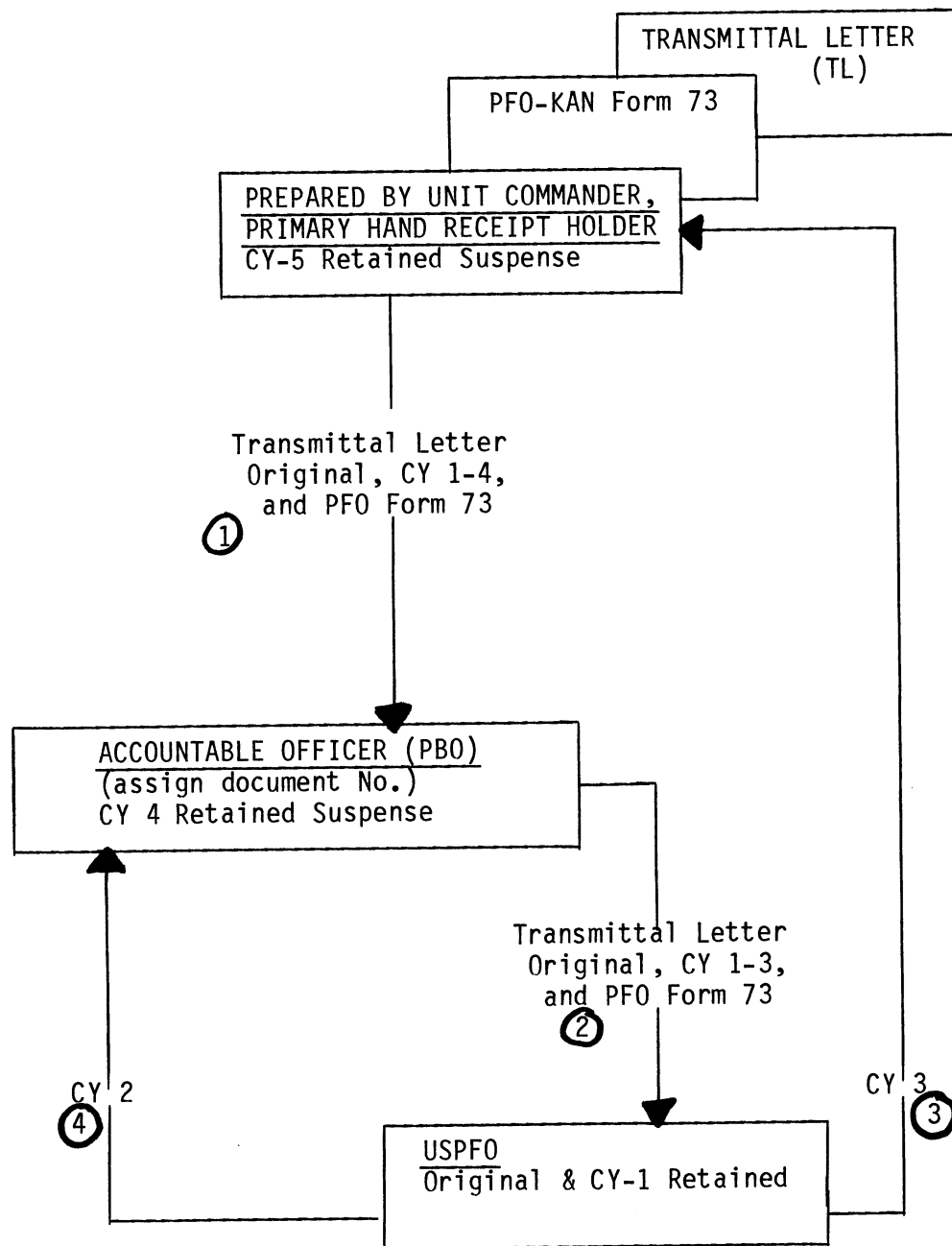
TABLE 3-1. Continued

11. Unit price.....	In the case of loss, irreparable damage, or complete destruction, enter the unit cost per article as obtained from current supply manual or AMDF. Allow depreciation in the way and within the limitations set forth in para 4-19, AR 735-11. When a depreciation allowance is taken, properly annotate the "article" and "unit price" columns as shown in Figure 3-1. In case of repairable damage, enter the cost of repair in the total column, and file a statement showing the way of computing the amount of the damage as an exhibit.
12. Total.....	Extend unit price and enter total values in the extreme right section of this space in the "Total" column. Enter the sum of these entries in the block to the right of "Grand Total" block.
13. Name, grade, and social security.. number	Type name, grade, and social security number of each person involved.
14. Cause of charge.....	Enter the reason for the charge, such as lost, damaged, or destroyed government property.
15. Total charge.....	Enter the amount to be charged to each person. Enter the total charge against all persons charged in the "Grand total" block under the column "Total Charge".
16. Signature of individual and amount.. accepted	Each person who admits liability will enter his or her signature and amount accepted in the proper space opposite his or her name.
17. Organization commander.....	The unit or activity commander will date and sign in the space titled "Date" and "Signature".
18. Disbursing officer or payroll..... certifying officer	In the spaces titled "Date" and "Signature", the USPF0, or his or her designee, will enter the date and his or her signature after the debt has been verified as accepted for collection against the member's pay account. The unit commander will verify that a correct entry appears on the person's leave and earning statement (LES).

TABLE 3-1. Continued

19. Property voucher number..... The person maintaining the document register will enter the property document or voucher number.

STATEMENT OF CHARGES FLOW CHART



UNIT COMMANDER/PRIMARY HAND RECEIPT HOLDER WILL:
Prepare in Original and 5 copies and prepare PFO-KAN Form 73

- ① Unit forward original and copies 1-4, retain copy 5 as suspense.
- ② PBO forward original, copies 1-3, and PFO-KAN Form 73 to USPFO Military Pay Section. PBO retain copy 4 as suspense.
- ③ Copy 3 signed by PFO Comptroller and returned to unit.
- ④ Copy 2 signed by PFO Comptroller and returned to PBO.

STATEMENT OF CHARGES FOR GOVERNMENT PROPERTY LOST, DAMAGED OR DESTROYED					MILITARY PAY ORDER NUMBER		DATE 5 January 1982				
CLASS OF PROPERTY PBO 2/435th FA Bn, WABCAA			ORGANIZATION HHB 2/435th FA Bn WABCA1				FOR MONTH OF February 1982				
STOCK RECORD ACCOUNT OR OTHER PROPERTY RECORD OF ACCOUNTABLE OFFICER I. M. Wright, CW4, PBO			STATION Anytown, KS								
STOCK NO.	ARTICLES	QUANTITIES							TOTAL ARTICLES	UNIT PRICE	TOTAL
		1	2	3	4	5	6	7			
6230-00-264-8261	Flashlight, MX-991/U (\$1.30)	1		1					2	.97*	1.94
8405-00-240-2461 (L70720)	Liner, parka, mans, mohair, frieze, OG, shade 107 (\$10.65)		1						1	9.58*	9.58
8405-00-223-7623 (N69904)	Parka, mans, ctn-nylon oxford, OG, shade 107, wo liner (12.65)	1							1	11.38*	11.38
*Depreciation allowed											
GRAND TOTAL										\$22.90	

CERTIFICATE OF RESPONSIBLE INDIVIDUALS

I certify that my signature hereon constitutes:

a. An authorization to recover the amount of indebtedness by payroll deduction.

b. An affirmation that the articles are not now in my possession.

c. An agreement to turn in to the appropriate supply officer all articles later recovered, it being understood that the United States Government retains title to the articles listed hereon.

COL NO.	NAME, GRADE AND SOCIAL SECURITY NUMBER	CAUSE FOR CHARGE	TOTAL CHARGE	SIGNATURE OF INDIVIDUAL & AMOUNT ACCEPTED	
				SIGNATURE	AMOUNT ACCEPTED
1	NAME Meyer, A.S. GRADE PFC ETS: 7 Apr 82 SSN 116-38-0140	Lost Govt Property	\$12.35	Allen S. Meyer	\$12.35
2	NAME O'Boyle, P. A. GRADE GS-7 ETS: N/A SSN 234-56-7890	Lost Govt Property	\$ 9.58	Paul A. O'Boyle	\$9.35
3	NAME Wright, I. M. GRADE CPT ETS: Indf SSN 215-44-2914	Lost Govt Property	\$.97	Irwin M. Wright	\$.97
4	NAME GRADE SSN				
5	NAME GRADE SSN				
6	NAME GRADE SSN				
7	NAME GRADE SSN				
GRAND TOTAL			\$22.90		

ORGANIZATION COMMANDER

The statements hereon are complete and correct, all damaged property has been disposed of in accordance with current directives and the charges have been computed in accordance with the provisions of AR 735-11 (AFM 67-1 for USAF).

DISBURSING OFFICER OR PAYROLL CERTIFYING OFFICER

The charge set opposite the name of each person listed hereon has been entered on the appropriate pay record or payroll, or DD Form 139 has been prepared and forwarded for collection.

DATE 31 Jan 82
SIGNATURE Frank B. Campbell
FRANK B. CAMPBELL
CPT, FA

DATE
SIGNATURE
PROPERTY VOUCHER NUMBER
W55XYZ 2008-0001

CHAPTER IV
CASH COLLECTION (DD FORM 1131)

4-1. Purpose:

a. DD Form 1131 is used to document the receipt of check or money order settlement for government equipment which was lost, damaged, or destroyed subject to certain limitations and/or restrictions.

b. Used to support credit entries to property records when monies for the value shown on DD Form 1131 are received.

4-2. Policy: Any individual may voluntarily, or in response to a request, offer payment in cash for value of property loss. Cash payment will not be demanded. Payment must be by personal check, cashier's check, or money order made payable to "F&AO, Ft Riley, KS".

4-3. Restrictions: Cash collections cannot be used:

- a. For sensitive items, i.e., small arms and ammunition.
- b. If amount exceeds individual's monthly basic pay.
- c. Change of accountable officer inventory.
- d. To purchase government property.

4-4. Action Required by Unit Commander:

a. DD Form 1131 will be prepared IAW Figure 4-1 when used in lieu of an investigation.

b. DD Form 1131 will be prepared IAW Figure 4-2 when used as a settlement of a Report of Survey.

c. Prepare in original and eight (8) copies.

d. Prepare ~~card~~ keypunch adjustment data collection worksheet IAW Appendix A if DD Form 1131 is being used ILO investigation. (Data collection worksheet is not required if DD Form 1131 is being used as settlement of a Report of Survey.)

e. Retain copy 8 as suspense.

f. Forward original and copy 1-7, monies for values shown on DD Form 1131, and PFO Form 73, if applicable, to Property Book Officer. See Table 4-2 for Flow Chart.

4-5. Action Required by Property Book Officer:

- a. Review adjustment document and data collection worksheet for completeness and accuracy. Verify prices with AMDF. Document will be annotated and initialed that prices have been verified.
- b. Assign document number. If DD Form 1131 is for settlement of Report of Survey, assign same document number as survey. Also, add document number to data collection worksheet.
- c. Retain copy 7 and post property book records. Do not post if DD Form 1131 is for settlement of a Report of Survey.
- d. Forward original copy 1-6, monies collected, accompanied by data collection worksheet, to USPF0. See Table 4-1 for Flow Chart.

CASH COLLECTION (DD FORM 1131) FLOW CHART

ORIGINAL AND 8 CY'S

TABLE 4-1, KNGR 735-11

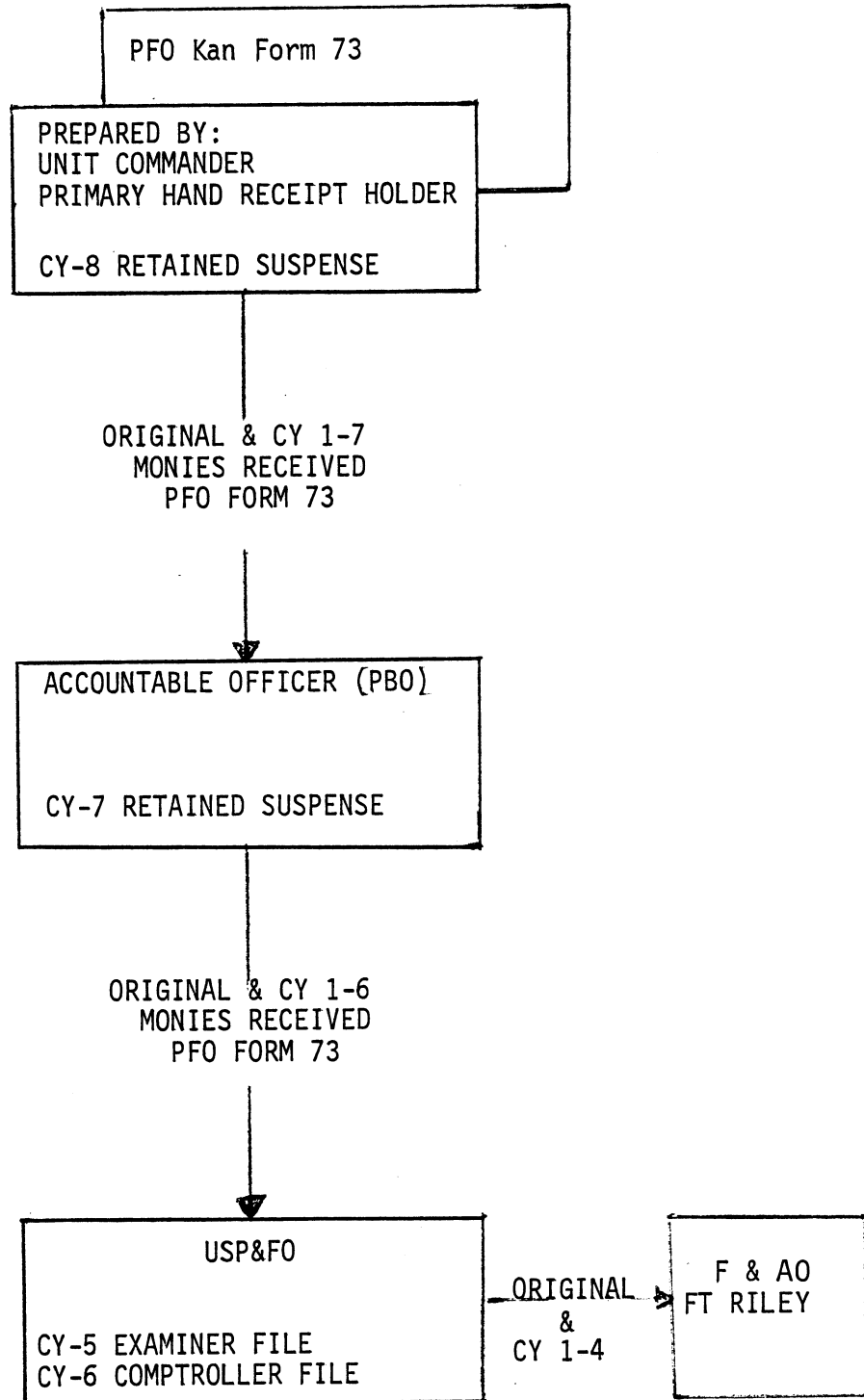


TABLE 4-1, KNGR 735-11

FIGURE 4-1, KNGR 735-11

CASH COLLECTION VOUCHER		DISBURSING OFFICE COLLECTION VOUCHER NO.		
		RECEIVING OFFICE COLLECTION VOUCHER NO.		
RECEIVING OFFICE	ACTIVITY (Name and location) (Include ZIP Code) HHC 84th S&S Bn, Anytown, KS W55CBS 2005-0001			DATE 5 January 1982
	RECEIVED AND FORWARDED BY (Printed name, title and signature) WILLIAM E. SEARCY, COL, NGB USPFO for Kansas			
DISBURSING OFFICE	ACTIVITY (Name and location) (Include ZIP Code) FINANCE AND ACCOUNTING OFFICE, FT RILEY, KS 66442			DATE RECEIVED SUBJECT TO COLLECTION (Leave Blank)
	DISBURSING OFFICER (Printed name, title and signature) (Leave Blank)		DISBURSING STATION SYMBOL NO. 5008	
PERIOD: FROM TO				
DATE REC'D	NAME OF REMITTER DESCRIPTION OF REMITTANCE	DETAILED DESCRIPTION OF PURPOSE FOR WHICH COLLECTIONS WERE RECEIVED	AMOUNT	ACCOUNTING CLASSIFICATION
	<i>Emmet O. Bradley</i> Emmet O. Bradley, CPT 123-45-6789	Accy kit, MK1506/VRC 5815-00-402-5308 1 ea, \$482.00, RICC 2 A020122, No residue	\$434.00*	
	<i>Paul A. Wallace</i> Paul A. Wallace, SGT 151-516-6889	Sleeping bag, artic 8465-00-264-5084 1 ea, \$41.00, RICC 2 T71706, No residue	\$ 36.90*	
	<i>Julian D. Edmondson</i> Julian D. Edmondson, GS-7 202-03-0300	Mask, prot, ABCM17 S 4242-00-542-4450 1 ea, \$40.18, RICC 1 M11895, No residue	\$ 36.17*	
Used instead of an investigation, para 2-3, AR 735-11.				
The signature hereon are agreements to turn in to the proper supply officer all articles later recovered. It is understood that the US Government will retain title to the articles listed on this form.				
*Depreciation allowed per paragraph 4-19, AR 735-11.				
TOTAL			\$507.00	

DD FORM 1131

REPLACES EDITION OF 1 APR 56 WHICH IS OBSOLETE.

Form approved by Comptroller General, U.S.
24 January 1958

FIGURE 4-2, KNGR 735-11

CASH COLLECTION VOUCHER		DISBURSING OFFICE COLLECTION VOUCHER NO.		
		RECEIVING OFFICE COLLECTION VOUCHER NO.		
RECEIVING OFFICE	ACTIVITY (Name and location) (Include ZIP Code)			
	HHC 84th S&S Bn, Anytown, KS W55CBS 2005-0002			
DISBURSING OFFICE	RECEIVED AND FORWARDED BY (Printed name, title and signature)		DATE	
	WILLIAM E. SEARCY, COL, NGB USPFO for Kansas		5 January 1982	
DISBURSING OFFICE	ACTIVITY (Name and location) (Include ZIP Code)			
	FINANCE AND ACCOUNTING OFFICE, FORT RILEY, KS 66442			
	DISBURSING OFFICER (Printed name, title and signature)		DISBURSING STATION SYMBOL NO.	DATE RECEIVED SUBJECT TO COLLECTION
	(Leave Blank)		5008	(Leave Blank)
PERIOD: FROM TO				
DATE REC'D	NAME OF REMITTER DESCRIPTION OF REMITTANCE	DETAILED DESCRIPTION OF PURPOSE FOR WHICH COLLECTIONS WERE RECEIVED	AMOUNT	ACCOUNTING CLASSIFICATION
5Jan	Earl D. Jones SGT E-5, 510-17-2579 HHC 84th S&S Bn Anytown, KS	Payment received for Approved Report of Survey No. <u>2-82</u>	\$27.15	21R3019
<p>NOTE:</p> <p>Document number assigned to this document will be the same document number assigned to the Report of Survey.</p> <p>Survey No. is assigned by the approving authority as is taken from CY-1, Block 2.</p>				
TOTAL			\$27.15	

DD FORM 1131
1 APR 57

REPLACES EDITION OF 1 APR 56 WHICH IS OBSOLETE.

Form approved by Comptroller General, U.S.
24 January 1958

CHAPTER V

ACCOUNTABILITY OF ORGANIZATIONAL AND INDIVIDUAL CLOTHING FOR ARNG MEMBERS WHO ARE ABSENT AND THEIR WHEREABOUTS ARE UNKNOWN

5-1. Purpose: This Chapter prescribes mandatory Report of Survey procedures for federal property issued to or otherwise placed in the custody of a member who:

a. When, by reason of prolonged and unexplained absence, it appears that such member does not intend to participate in training as an active member of the ARNG, or:

b. The individual concerned has absented himself and his whereabouts are unknown.

c. Prompt action in initiating property settlement at the first indication of prolonged, unexcused, or unexplained absence of an individual will be taken to effect collection prior to the member's separation from the ARNG.

5-2. Action by the Commander:

a. Attempt to locate the individual.

(1) Unit commander or representative will visit last known address.

(2) Visit civilian employer.

(3) Statement by unit commander that (1) and (2) above have been accomplished. (Attach as Exhibit to Report of Survey).

b. Send a certified, return receipt requested, letter to the individual's last known address. Non-receipt of the certified letter, notifying the individual to return the government property, will serve as evidence that the absent individual cannot be located. (Attach as Exhibit to Report of Survey).

c. Prepare a Report of Survey, DA Form 4697, IAW Chapter II.

+ (1) The company commander will enter the following statement in Block 11, DA Form 4697: "This survey is initiated to clear property records for loss of items listed above. Items were issued to PVT John A. Doe, SSAN XXX-XX-XXXX, who has (absented himself without leave) (stopped attending drills prior to his ETS date) and has been declared a deserter. PVT Doe's whereabouts are unknown. Clothing records (hand-receipts) to substantiate these items were issued to PVT Doe and results of the inventory are attached as Exhibit A. Evidence of attempts to contact PVT Doe and recover the property are attached as Exhibits B through XX."

(2) Attach original and two (2) copies of the individual's DA Form 3078/3645 as exhibits to Report of Survey.

CHAPTER VI

ACCOUNTABILITY OF ORGANIZATIONAL AND INDIVIDUAL
CLOTHING AND EQUIPMENT (OCE) (ICE) FOR DECEASED PERSONNEL

6-1. Policy: Accountability is the same as for all government property. The unit commander is responsible to withdraw all organizational clothing and equipment of the deceased and turn-in for adjustment to the Organizational Clothing and Equipment Record. Under the issue in kind system, personal clothing other than that required for burial will also be recovered. Adjustment for missing property is accomplished by Report of Survey.

6-2. Procedures:

a. Retrieval and accountability extends to obtaining recoverable OCE and ICE located outside of the armory. It is recognized that (when dealing with next of kin) there are sensitive aspects of this accountability requirement. Efforts must be made, however, to regain control of all the recoverable property. Battalion and higher commanders will determine the most suitable methods to approach the next of kin.

b. When all of the recoverable property cannot be reclaimed, prepare Report of Survey IAW Chapter II.

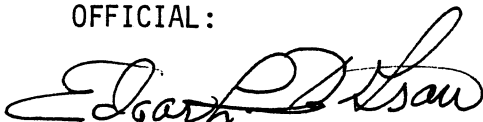
(1) Circumstances and efforts attempted will be described in block 11.

(2) Clothing and Equipment Records (DA Form 3078/3645) and a copy of the approved Report of Survey will be placed in the deceased individual's MPRJ.

THE PROPONENT OF THIS REGULATION IS THE OFFICE OF THE ADJUTANT GENERAL OF KANSAS. USERS ARE INVITED TO SEND COMMENTS AND SUGGESTED IMPROVEMENTS TO THE ADJUTANT GENERAL OF KANSAS, ATTN: AGKS-USPFO (ARL), P.O. BOX C-300, TOPEKA, KS 66601.

BY ORDER OF THE GOVERNOR:

OFFICIAL:



EDGAR L. DeGRAW
BG, AGC, KSARNG
Assistant Adjutant General (Army)

RALPH T. TICE
MG, KSARNG
The Adjutant General

DISTRIBUTION:

A